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CONFIRMATION NO. 4739

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|--|---|-------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 10/801,270 | FILING OR 371(c) DATE 03/16/2004 RULE | CLASS 428 | GROUP ART UNIT 1794 | ATTORNEY DOCKET NO. HSJ920040054US1 | |
| APPLICANTS Joseph Silva, Hollister, CA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/01/2004 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY CA | SHEETS DRAWING 2 | TOTAL CLAIMS 20 | INDEPENDENT CLAIMS 4 |
| ADDRESS 36023 | | | | | |
| TITLE SYSTEM AND METHOD FOR CONTROLLING WRITE TO MINIMIZE ATI AND SQUEEZE EFFECTS | | | | | |
| FILING FEE RECEIVED 1356 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit | | |